, , ,									Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003								10/087996					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALI TYPE	_ EN		OR		THAN ENTITY
TOTAL CLAIMS			,					RAT	E	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC	FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			minus 20=		*			X\$ 9=			OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =		*	*		X43=		······································	OR	X86=	`
М	ULTIPLE DEPE	NDENT CLAIM P	RESENT					+145			1	+290=	
*	f the difference	e in column 1 is	less than zero, enter "0" in column 2					<u> </u>	_		OR		
•			Q in					TOTA	'L	·	OR	TOTAL	
		LAIMS AS A (Column 1)	MENDED - PART II 9-, (Column 2) (Column 2)			9-13-1 (Column <u>3)</u>	94	' SMAL	.LE	NTITY	OR	OTHER SMALL	
AMENDMENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	EST BER USLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ZOZ	Total	* 88	Minus.	** 88		=		X\$ 9=	=		OR	X\$18=	
AME	Independent	* 8	Minus	*** 8	<u> </u>			X43=			OR	X86=	,
	FIRST PRESE	NTATION OF MI	JUNPLE DE	PENDENT	CLAIM			+145=			OR	+290=	
									AL.		OR ,	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)									E L		,	KUDII. FEET	
NOMENT B	J o	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		RATE		ADDI- TONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	** .		=		X\$ 9=			OR	X\$18=	
AMENE	Independent	*	Minus	***		=		X43=			OR	X86=	
`	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								1		OR	+290=	
									E L		لا م OR	TOTAL DDIT. FEE	,
	(Column 1) (Column 2) (Column 3)										,		
2		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID F	ST ER JSLY	PRESENT EXTRA		RATE		ADDI- IONAL FEE		# RATE	ADDI- TIONAL FEE
MENDMEN	Total	*	Minus	##		= .		X\$ 9=			OR	X\$18=	
	Independent	*	Minus	***		=		X43=	+		OR	X86=	
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=	+		1		
é H	If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR [+290= TOTAL	
** H	* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR A	DDIT. FEE	
T	he "Highest Num	ber Previously Paid	For" (Total or	Independen	it) is the	highest number	r foun	d in the a	appro	priate box	in colu	mn 1.	